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PPB  
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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/457,940 03/28/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/11/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 1	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

## Verified and Acknowledged

Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

ADDRESS  
22245

## TITLE

RAPID IMMUNOASSAY OF ANTHRAX PROTECTIVE ANTIGEN IN VACCINE CULTURES AND BODILY FLUIDS BY FLUORESCENCE POLARIZATION

FILING FEE RECEIVED 1326	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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